## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001

Application or Docket Number

09 995483

CLAIMS AS FILED - PART I (Column 1) (Column 2)							_	SMALL EN		OR:	OTHER SMALL										
TOTAL CLAIMS							ſ	RATE	FEE		PATE	FEE									
FOR			NUMBER FILED		NUMBER EXTRA		•	BASIC FEE	370.00	OR	BASIC FEE	740.00									
тот	TAL CHARGEA	BLE CLAME	54 minus 20=		· /6			X\$ 9=	144	OR	X\$18=	288									
INDEPENDENT CLAIMS			19 minus 3 =		* 4		l	X42=	168	OR	X84=	336									
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT	·	<del></del>			•				-00									
* If the difference in column 1 is less than zero, enter "0" in column 2							+140=	100	OR	+280=	127 1										
IT.		•	•			. Committee for		TOTAL	682	OR	TOTAL	HOY Y									
	Cl	LAIMS AS A (Column 1)	MENDED	- PAR Colui)		(Column 3)		SMALL I	ENTITY	OR :	OTHER SMALL										
	نحسنسين	(Column 1) CLAIMS			HEST	12.2.1113)	ř		ADDI-			ADDI-									
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM	IBER OUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE									
	Total	. 54	Minus	**		=		X\$ 9=		OR	X\$18=										
	Independent	* 19	Minus			=		X42=		OR	X84=										
L	FIRST PRESE	NTATION OF MI	ULTIPLE DEF	ENDEN	CLAIM	<b></b>	1	+140=.		OR	+280=										
			**			٠.	1.	TOTAL		OR	TOTAL ADDIT: FEE										
D		(Cal.,		ADDIT. FEE			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,														
7-		(Column 1) CLAIMS	·	(Colu	MR 2) REST	(Column 3)	r		ACC:	i		ADDI-									
ENTE		REMAINING AFTER AMENDMENT		NUM PREVI	ABER OUSLY FOR	PRESENT EXTRA		FATE	ADDI- TIONAL FEE		RATE	TIONAL FEE									
AMENDMEN	Total	•	Minus	**		8		X\$ 9=	· .	, OR	X\$18=										
ME	Independent	*	Minus	***	F.O. 5	=		X42=		OR	X84=										
ت	FIRST PRESE	NTATION OF MU	ULTIPLE DEF	ENDEN	CLAIM		<b>,</b>	+140=		OR	+280=										
		:						TOTAL		OR	TOTAL										
				٠.			_	ADDIT. FEE		Un.	ADDIT. FEE	L									
		(Column 1)				(Column 3)			,												
AMENDMENT C	e The second of the second of	CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE									
MO	Total	*	Minus	##		<b>3</b>		X\$ 9=		OR	X\$18=										
ME	Independent	*	Minus	***		3 .	<b>   </b>	X42=		OR	X84=										
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								<del>-</del>	"	· · · ·	1									
								+140=		OR	+280=	:									
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  ADDIT. FEE												L									
). <del></del>	in use mignest Num Th *Highest Num	industry Previously Pa	ild For" (Total or	r Independ		highest numbe	er fou	and in the ap	propriate bo	****If the 'Highest Number Pr. viously Paid For' IN THIS SPACE is less than 3, enter '3."  Th. "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											